

4-00-71

Date Entered		105
Customer Number		4-00-71
Declared Value		27
Class		Paid Record
XX		XXX
Scale or Gate	Priced by	
C. O. D.		
Method of Payment		4-00-71
Method for Collection of Charges		Prepaid
This document is issued by RAILWAY EXPRESS AGENCY, Inc., for charges entered hereon.		
Number Poco's		Date
105		105
For the Company		

Name of Consignee		Book or Number	Value Charged
14-00-72		14-00-72	14-00-72
Address of Consignee		Declared Value	Estimated Weight
14-00-72 Mr. Kiso-Pleasantville, N. Y. (E) (00-05)		14-00-72	14-00-72
Description		Weight	Dimensions
14-00-72		14-00-72	14-00-72
Shippers Street Address		Paid Forward	14-00-72
		XX XXX	14-00-72
Name or Title of Collector		Name or Date	Tracked by
14-00-72		14-00-72	14-00-72
Payment received by RAILWAY EXPRESS AGENCY, Inc., for charges entered herein		C. O. D. Below	
14-00-72		14-00-72	
Number Placed		Date	Box
For the Consignee		195	A. M. P. M.

SLICK

The Certificated Scheduled Air Freight Line

UNIFORM AIRBILL

NONNEGOTIABLE

AIRBILL NUMBER (INSERTED BY CARRIER)

342 —

388163

FROM (CONSIGNOR) Leland Premium Lts.			TO (CONSIGNEE) Slick Airways Inc.			
CONSIGNOR'S STREET ADDRESS 2725 Franklin Ave.			CONSIGNEE'S STREET ADDRESS 1100 South 10th St.			
CITY X	ZONE	STATE	CITY	ZONE	STATE	
BY X			CONSIGNOR'S NO.			
DECLARED VALUE Agreed and understood to be not more than the value stated in the governing tariff for such pound on which charges are assessed, unless a higher value is declared and applicable charges paid thereon. \$ 1000			DESTINATION AIRPORT CITY			
RECEIVED BY CARRIER AT (CHECK ONE)			DELIVERY Will be made to the Consignee at points where delivery service is available unless otherwise specified below.			
<input checked="" type="checkbox"/> CONSIGNOR'S DOOR <input type="checkbox"/> CITY TERMINAL <input type="checkbox"/> AIRPORT TERMINAL			<input type="checkbox"/> CITY TERMINAL <input type="checkbox"/> AIRPORT TERMINAL			
NO. OF PIECES	DESCRIPTION OF PIECES AND CONTENTS		WEIGHT	AIRLINE ROUTING TO	RATE	CHARGES
1	1 box, std. cont.		17			
SPECIAL INSTRUCTIONS <i>Do not handle</i>			CLASSIFICATION TO SICK AIRWAYS INC.			COMAT
THIS IS YOUR INVOICE PAYMENT DUE IN 7 DAYS			SUMMARY OF CHARGES			COLLECT CHARGES
DIMENSIONS			Weight - Rate Charges			AMOUNT
X	X	CU. IN.	Pick-up Charges	CLASSIFICATION INV.	6645-51	175
\$	RECEIVED TO APPLY IN PAYMENT OF THE CHARGES ON THE PROPERTY DESCRIBED HEREON.		Delivery Charges			
BY	AGENT		Excess Value Transportation Charge			
IMPORTANT. Write or print clearly. Carrier will complete all items below bold line, EXCEPT CONSIGNOR'S C.O.D. Weights are subject to correction.			Sub-Total	VEND NO.		
IT IS MUTUALLY AGREED THAT THE GOODS HEREIN DESCRIBED ARE ACCEPTED IN APPARENT GOOD ORDER (EXCEPT AS NOTED) FOR TRANSPORTATION AS SPECIFIED HEREIN, SUBJECT TO GOVERNING CLASSIFICATIONS AND TARIFFS IN EFFECT AS OF THE DATE HEREOF WHICH ARE FILED IN ACCORDANCE WITH LAW. SAID CLASSIFICATIONS AND TARIFFS, COPIES OF WHICH ARE AVAILABLE FOR INSPECTION BY THE PARTIES HERETO, ARE HEREBY INCORPORATED INTO AND MADE PART OF THIS CONTRACT.			Transportation Tax	H.R. NO.		
RECEIVED BY SLICK AIRWAYS, INC.			Charges Advanced	AUDITED	IVO	
(SIGNATURE OF AGENT)			→ Consignor's C.O.D.	XX	XX	
AT	1100 South 10th St.		C.O. D. Fee			
DATE	1971		TOTAL CHARGES			
TIME	A.M. P.M.					

ORIGINAL INVOICE

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Approved For Release 2000/04/18 : CIA-RDP81B00879R000900190037-7